

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	170	70591	1/14
O.I.P.E. CLASSIFIER			2-2-00
FORMALITY REVIEW	BA	71423	3-9-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	11/6/02
2	5/19/03
3	11/5/03
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32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	N
41	N
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Claim	Date
Final Original	
51	11/1/02
52	5/19/03
53	11/5/03
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Claim	Date
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If more than 150 claims or 10 actions  
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